

United States Of America  
Department of Transportation - Federal Aviation Administration  
**Supplemental Type Certificate**

*Number* SA7969SW

*This Certificate issued to* Emde Enterprises, Inc.  
13653 S.E. 15th St.  
Choctaw, OK 73020

*certifies that the change in the type design for the following product with the limitations and conditions therefor as specified hereon meets the airworthiness requirements of Part 21 of the Federal Aviation Regulations.*

*Original Product Type Certificate Number:* A9CE

*Make:* Cessna

*Model:* 188A, A188B, T188C

*Description of Type Design Change:*

Install fiberglass, wing leading edge cuffs in accordance with Escott AG Sales Drawing No. 1000 Rev A, 5-29-90; 1001 Rev. B, 8-1-90; and Process Specification FPS 1001 Rev A, 5-29-90; or later FAA approved revision.

*Limitations and Conditions:*

Compatibility of this modification with previously installed equipment must be determined by installer.

*This certificate and the supporting data which is the basis for approval shall remain in effect until surrendered, suspended, revoked or a termination date is otherwise established by the Administrator of the Federal Aviation Administration.*

*Date of application:* May 18, 1989

*Date reissued:* September 17, 1997

*Date of issuance:* February 8, 1991

*Date amended:*



*By direction of the Administrator*

*A. J. Merrill*  
(Signature)

A. J. Merrill  
Manager, Special Certification Office  
Southwest Region

(Title)

INSTRUCTIONS: The transfer endorsement below may be used to notify the appropriate FAA Regional Office of the transfer of this Supplemental Type Certificate.

The FAA will reissue the certificate in the name of the transferee and forward it to him.

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### TRANSFER ENDORSEMENT

Transfer the ownership of Supplemental Type Certificate Number \_\_\_\_\_

to *(Name of transferee)* \_\_\_\_\_

*(Address of transferee)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

from *(Name of grantor)* *(Print or type)* \_\_\_\_\_

*(Address of grantor)* \_\_\_\_\_  
*(Number and street)*

\_\_\_\_\_  
*(City, State, and ZIP code)*

Extent of Authority (if licensing agreement): \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Transfer: \_\_\_\_\_

Signature of grantor *(In ink)*: \_\_\_\_\_